	y of Portland, Mai		_					Issue Date:	1	CBT:		
389	Congress Street, 041	01 Tel: (207) 874-8703	, Fax:	(207) 874-8710	60	06-1652			224 A0	10001	
Location of Construction:			Owner Name:			Owner Address:				Phone:		
294 CAPISIC ST			BRODER BERNARD J III			49 PHINNEY ST						
Business Name: Lessee/Buyer's Name			Contractor Name: Quality Insulation Phone:			Contractor Address:				Phone		
						65 Downeast Drive Yarmouth				2078467745		
						Permit Type: HVAC					Zone:	
			<u> </u>					G			<u> </u>	
Past Use: Proposed Use:				Uomo	Lannov	Permit Fee: Cost of Work: \$40.00 \$1,825.00				CEO District:	1	
3111	igle Family Home		Single Family Direct Vent Fi			NAME OF THE PARTY				SPECTION:		
							Approved	Use Group: R 3 Type: 518				
								Denied	.			
										IRC 2003		
Prop	posed Project Description:	-	<u> </u>						[, -		
Lennox Direct Vent Fireplace					Signature: PEDESTRIAN ACTIVITIES DIS Action: Approved A			TRC 2003 Signature: 2 11/14/06				
							IAN ACTI	VITIES DIST	RICT (P.	Γ (P.A.D.)		
							Action: Approved Approved w/C				/Conditions Denied	
										Date:		
Porr	nit Takan Ru	Date Ar	valied For:			Signature:						
Permit Taken By: Date Applied For: 11/13/2006			-		Zoning Approval							
<u> </u>	This permit application does not Applicant(s) from meeting applic		-	Special Zone or Reviews		ws	Zoning Appeal			Historic Preservation		
1.				Shoreland		Variance			Not in District or Land		et or Landma	
	Federal Rules.	8		Shoreland		, variance			The management of Bandina			
2. Building permits do not include pluseptic or electrical work.			olumbing, Wetland			Miscellaneous		[Does Not Require Review			
3. Building permits are void if work is not starte within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work PERMIT ISSU				Flood Zone			Conditional Use			Requires Review		
				Subdivision			Interpretation			Approved		
				☐ Si	te Plan	Approved			[Approved w/Conditions		
			AIT ISSUED	Maj	Minor MM	Denied				Denied		
			and the second s	Date:		Dat	·e·		Da	te [.]		
1101/ 4 7				Tail.					Du			
		NO/			1							
TO PARTY AND												
	Birmen.			_								
					CERTIFICATIO							
I he	reby certify that I am the ve been authorized by th	e owner of	record of the na	med pro	operty, or that th	e propose	ed work is	authorized	by the o	wner of recor	d and that	
juris	sdiction. In addition, if a	a permit fo	r work described	d in the	application is is	sued, I ce	rtify that	the code off	icial's au	ithorized repr	esentative	
shal	I have the authority to en											
such	n permit.											
SIGNATURE OF APPLICANT					ADDRESS	S DATE				PHONE		
DEC	SPONGIRI E DED CON IN CUI	ADCE OF W	יחסע זיידו ב	_				DATE			ME	
IVE	SPONSIBLE PERSON IN CH	$\forall V \cap C \cap V$	OKK, HILE					DATE		PHO	INE	

City of Portland, Maine - Buil 389 Congress Street, 04101 Tel: (_	Permit No: 06-1652	Date Applied For: 11/13/2006	CBL: 224 A010001								
Location of Construction:	Owner Name:		Owner Address:		Phone:							
294 CAPISIC ST	BRODER BERNARD	J III	49 PHINNEY ST									
Business Name:	Contractor Name:		Contractor Address:	Phone								
	Quality Insulation		65 Downeast Drive	Yarmouth	(207) 846-7745							
Lessee/Buyer's Name	Phone:		Permit Type: HVAC									
Proposed Use: Proposed Project Description:												
Single Family Home- Lennox Direct	vent Fireplace	Lenno	x Direct Vent Firep									
Dept: Zoning Status: N	lot Applicable	Reviewer:		Approval Date:								
Note:		Ok to Issue:										
Dept: Building Status: A	approved with Condition	s Reviewer:	Tom Markley	Approval Da	ite: 11/14/2006							
Note:					Ok to Issue:							
1) The installation must comply with the State of Maine Gas Regulations.												